

FIRST INTERNATIONAL SYMPOSIUM ON VENEREAL DISEASES AND THE TREPONEMATOSES, 1956

The first International Symposium on Venereal Diseases and the Treponematoses, provided a unique opportunity for meeting those whose names are almost legendary in venereology. The Editorial in the June issue of the Journal paid tribute to the great efficiency and magnitude of the project, expressing the appreciation not only of the six venereologists who attended from Britain but of all the participants.

The Symposium was held in Washington's spacious Hotel Statler, where the 600 odd delegates never felt crowded. Welcomed by the cheery professional and secretarial members of Dr. C. A. Smith's staff, all felt an atmosphere of sincerity and enthusiasm from the first, and the heartiness of the handshakes quickly cured the writer's tennis-elbow.

The papers presented covered every aspect of the world-wide problems, with particular emphasis on the treponemal diseases. The official record of the facts and theories expounded, which will afford long retrospection and consideration, have filled a very sizable volume even in abstract.

Three presentations particularly struck the British delegates. Yaws, bejel, and pinta, which are unfamiliar in this country were seen to be real problems when depicted by some beautiful photography of the clinical manifestations. We heard categorical affirmation that yaws can be congenital, that it never gives rise to cardiovascular or neurological involvement, and, that, while it exists, it remains a reservoir from which syphilis may spread as the treponeme and the host meet under differing climatic and social conditions. Thus arose the significant question: "The Treponematoses—or Treponematosis?"

The report on the "Sing-Sing Syphilis Study", in which volunteers were inoculated with live Treponemes after some had received heat-killed *T. pallidum* before virulent challenge, was a most impressive exhibition of the resulting host-parasite response.

All delegates reported a low incidence of early syphilis with continuing high figures of late or latent cases. The promiscuous use of penicillin was frequently stated to be a major cause, and the belief was stated that the popular trend towards broad-spectrum antibiotics might bring more early syphilis to the notice of the clinician.

The new concept of "elimination—not just control" of venereal diseases was voiced by the many enthusiasts in this field, with continuing teaching of the undergraduate, post-graduate, and nurses, good propaganda to the masses, and a diligent search for unsuspected cases by means of "Programmes" were strongly advocated. A "Programme" consists of a sort of "Gallup-Poll" of a given community, in which all and sundry are offered

blood tests, either in their homes ("Operation Doorbell") or in the streets ("Operation Street Corner"). By these methods a percentage of 15 per cent. positive blood tests may be found in a coloured community, or of some 4 per cent. in one predominantly white. Even after deduction of treated cases and defaulters from these percentages, a fair amount of unsuspected syphilis has been uncovered. In American States a Central Registry of Syphilis adds to the efficiency of their attempts towards elimination.

The bogey of the biologic false positive has led to immense research in the serological field. The "Reagin" tests are quite out-moded by the TPI, TPA, TPCF, TPIA, and other "more specific" tests, but the rivalry amongst the "successors" to the TPI is still tremendous, and the proposed review of them all, in parallel, will be eagerly awaited by clinicians everywhere.

But we did not work all the time! Social occasions such as the vast reception and the international banquet further lowered any barriers, and by gesticulation, and often doubtful French, we carried on the discussions under the happy sedations of food and wine. The Russian delegates, who had challenged the optimism expressed about penicillin, were willing and interesting participants in these discussions. At the banquet, Dr. Hugo Hecht, who would not admit his age, transported us dramatically to the past when he told us of his association with Wassermann and Neisser in the early years of the century. Other social welcomes were afforded by the Minister of the Rumanian People's Republic, the Rotary Clubs, and, for the British delegates, the International Medical Society luncheon, where the British Ambassador, Sir Roger Makins, was the chief speaker.

Emerging in the evening from the air-conditioned Statler Hotel into the amazing heat and humidity outside, we could enjoy the beauty of Washington, with its broad streets, the White House, the Capitol, the Lincoln, Jefferson, and other memorials, and various wonderful buildings; the crowds so vivacious, the traffic so well regulated, the shops open everywhere until 9.30 p.m., the cafeterias, and the drug stores. Everywhere we were greeted with: "Can I help you?"

Following the Symposium many delegates radiated all over the United States, visiting hospitals, clinics, laboratories, and Health Departments from Boston in the north to Georgia in the south, and some in the far west. Everywhere our American colleagues gave us a delightful welcome and enthusiastically demonstrated their routine and research.

This was a Symposium of lasting value and stimulus and very, very happy memories.

D.J.C